

STATE OF ARIZONA POSITION DESCRIPTION QUESTIONNAIRE

1. Position Number: AHC-	2. Official Classification Title: (Leave blank if new position.)
3. Working Title: Program Services Evaluator	4. Work Hours and Days: Varied and flexible
5. Division: Member Services	6. Section: Field Operations Administration
7. Work Unit: KidsCare	8. Physical Work Location (Street Address) and Phone #: 920 E. Madison, Phoenix, AZ 85034 (602) 417-5437 OR Virtual Office Setting – Individual Employee's Home Address
9. Supervisor's Name, Official Title, Grade, and Phone Number: Program Services Evaluator IV, Grade 18 To be established	10. Will this Position Supervise / Manage? Yes / X No. (Circle One) (Circle One) # of Direct Reports: _____ # of Indirect Reports: _____ If position supervises/manages, the organization chart must include position number, class title and code, and grade for each employee being supervised by this position. Elaborate on authority in Section E. <i>Supervision is defined as the authority to approve sick/annual leave, recommend hiring, dismissal or discipline, assign/schedule work, complete performance evaluations, etc. See instructions for "Manager" definition.</i>

A. REQUEST TO: Establish New _____ Review _____ Uncover _____ Update Description Only X
(Check One)

Other, Specify__Title Change__
(See instructions for choices.)

Employee Initiated? **Yes / No.** See Personnel Rule R2-5-301.G. If yes, employee should submit
(Circle One) through agency management. For assistance, employee should
contact their agency human resources office.

B.JUSTIFICATION STATEMENT

1. Explain the events or changes that made this request necessary.

The job description of the position remains the same. However, some positions will be permitted to work from their home or an alternate work site. This type of work setting is referred to as Virtual Office. Employees working in the virtual office setting have higher productivity requirements and different reporting requirements.

2. Attach an organization chart clearly identifying each position's official classification title, class code, and grade. Include at least two levels of supervision above this position, this position's co-workers, and, if applicable, subordinates. If requesting a review, two (2) organization charts (current and proposed) must be attached.

C. JOB SUMMARY - In general terms, briefly describe the purpose of this position and for what it will be held accountable. Why does it exist?

Makes initial and subsequent determinations of eligibility for Title XIX Medicaid Medical Assistance Only and Title XXI Children's Health Insurance Program (KidsCare) based on Title XXI KidsCare eligibility criteria; interprets public assistance laws, rules, regulations, policies and procedures; advises applicants/recipients of their rights and responsibilities, including the right of appeal; assists individuals in the preparation of hearing requests; reviews documents verifying income received by family members as part of investigation of customer eligibility; documents all eligibility related material in Fortis electronic case records, enters data into eligibility determination systems ACE and KEDS.. This process will also require screening the applicant for potential eligibility for any Title XIX Medicaid program and if eligible, completing a referral to the Department of Economic Security for a Title XIX determination.

Responsible for accurate and timely initial and subsequent eligibility determinations; accurate and complete; application of the laws, rules and regulations required to determine eligibility; timely and accurate maintenance of ongoing cases; maintaining a daily productivity log.

Accurate and timely completion of assigned tasks. Authorizing of State and Federal funds for Title XIX Medicaid funds for Medical Assistance services or Title XXI, State Children's Health Insurance Program.

This position may allow the incumbent to work from a Virtual Office work site. The work duties will remain the same as indicated in this job summary. The employee will be expected to have a higher level of productivity than the expectations of in-house employees. The specific productivity requirements will be outlined in the employee planner and evaluation (ESE).

D. MAJOR RESPONSIBILITIES - What are the primary functions for which this position is accountable? Using action verbs, please state what you do and why you do it. (e.g., Writes, prints, and distributes monthly newsletter to keep departmental employees informed. Observes prison inmates to ensure order is maintained.) Please do not combine dissimilar responsibilities on one line (e.g., budget preparation and staff supervision are very different functions).

Ensure the time spent does not exceed 100%.

List primary responsibilities in increments of 5%.

	Percent Time Spent (%)
1.Telephone or face to face interview	20%
2. Eligibility determination, application completion and input into automated eligibility determination system	20%
3. Processing of eligibility (eligible and ineligible) on initial applications and redeterminations	40%
4. Research of rules, regulations, policies and procedures for KidsCare and other AHCCCS programs.	10%
5.Attend meetings in person, telephonically or via Microsoft Live Meeting – staff, departmental, weekly and monthly conferences with Supervisor, etc.	5%
6. Compiling needed productivity and other statistical reports	5%
INSERT ADDITIONAL ROWS or ATTACH SHEET AS NEEDED. MUST TOTAL	100%

- E. AUTHORITY** - What kinds of actions and decisions will the employee in this position be authorized to make? What kinds of actions and decisions will require clearance from the supervisor? *(If box #10 on Page 1 is marked "Yes", description must elaborate on this supervisory authority.)* Please be specific.

No line authority; works with limited supervision following KidsCare training; authority to make initial and subsequent determinations of eligibility; to assess applicant/recipient need for social services, to interpret Medicaid, KidsCare and public assistance laws for applicants/recipients and to advise them of their rights including the right to appeal; to assist them in preparation of hearing requests; to research tax rolls and examine public records as part of investigation of applicant/recipient eligibility.

- F. KNOWLEDGE, SKILLS, & ABILITIES (KSAs)** - What knowledge, skill and ability must the employee in this position have acquired in order to perform work satisfactorily? Please be specific. (Definitions: Knowledge is described as familiarity with something or possession of information or understanding in the mind. Skill is defined as a developed capability to perform tasks or actions effectively. A skill may be developed in a variety of manual, physical, intellectual or interpersonal activities. Ability is defined as a natural talent or acquired expertise.)

Good knowledge of Title XXI KidsCare laws, rules and regulations; of objectives of social service and public assistance programs; of financial eligibility policies and procedures; good knowledge of how to calculate budgets based upon the program applicant/recipient is tied to; of a wide range of community resources available to the applicant/recipient; knowledge of interviewing techniques including some knowledge of psychology; knowledge of good organization and prioritization of caseload duties. Familiarity with the logic used by the computer system, various AHCCCS and DES eligibility systems and various entities that will be contributing information to the member eligibility determinations.

Ability to organize and prioritize caseload quickly and efficiently; ability to communicate effectively, both verbally and in writing; ability to write observations, decisions and to document effectively; ability to make arithmetical calculations rapidly and accurately; ability to apply current laws, rules and regulations in making eligibility determinations. Ability to interview effectively; ability to relate to an individual's anger or hostility with patience, courtesy and tact.

How would the KSAs you have specified ordinarily be acquired? If education or training is cited, specify subject areas and courses. (Only list degrees or certifications **if** they are required to perform the job (e.g., C.P.A., Registered Nurse, Attorney) If work experience is cited, specify type of work and time on the job required.

Most skills are developed through rehearsal, repetition, and formal and informal training sessions with Supervisor and/or training personnel; two weeks eligibility training, one week of renewal training and refresher trainings as needed. Receive on the job training in various AHCCCS and DES systems and eligibility program policy and procedures. Works with Supervisor to develop professional responses. Attend agency and State mandatory training classes per ADOA regulations.

SUPERVISOR/AUTHORIZED AGENCY REPRESENTATIVE MUST COMPLETE SECTION G.

G. ESSENTIAL JOB FUNCTIONS - What are the physical, mental and environment demands for this position? Functions identified must coincide with the description of duties and major functions for this position. The functions should focus on what is to be done and the processes traditionally used to achieve the result or produce the end results. Essential vs marginal functions should reflect fundamental requirements for this position; and with the absence of such requirements the nature, scope, level or purpose of the position would be changed.

For each of the following requirements, indicate the frequency which it occurs to this position.

C = Continuously (>66%); **F** = Frequently (34-66%); **O** = Occasionally (10-33%); **R** = Rarely (<10%) **N/A** = Not Applicable.

PHYSICAL DEMANDS	Frequency	Applicable Major Functions
Balancing	N/A	
Climbing	N/A	
Crawling	N/A	
Fine Dexterity	F	2, 3
Foot Controls	N/A	
Hearing	F	1,2,3
Kneeling/Crouching/Bending	N/A	
Manual Dexterity	N/A	
Lifting/Carrying_____pounds	N/A	
Pushing/Pulling_____pounds	N/A	
Reaching	F	1
Sitting	C	1,2,3
Standing	R	5,6
Talking	F	1,2,3
Twisting	F	5,6
Upper Extremity Repetitive Motion	F	1,2,3
Vision	C	All
Walking/Running short distances_____ long distances_____	N/A	
Other (describe)		

NON-PHYSICAL DEMANDS	Frequency	Applicable Major Functions
Analysis/Reasoning	C	2,3,4
Communication Skills (distinguish from "talking" if additional requirement to simultaneously mentally analyze or reason and verbally express)	F	1
Math/Mental Computation	F	2,3

Reading	C	2,3,4
Sustained Mental Activity (Example: auditing, grant writing, composing reports, problem solving)	O	4
Writing	F	1,2
Other (describe)		

ENVIRONMENTAL DEMANDS	Frequency	Applicable Major Functions
Work Alone? Yes <u>80</u> No <u>20</u> % of time		
Dust	N/A	
Frequent Task Changes	O	5
High Volume Public Contact	F	2,3
Loud Noises	O	5
Physical Abuse/Physical Danger	N/A	
Tedious/Exacting Work	F	1,2,3,4
Temperature Extremes	N/A	
Toxic Substances, i.e., white out, glue, cleaning chemicals, etc.	N/A	

SIGNATURE: Except for Part G, Essential Job Functions, this questionnaire should have been completed by the employee working in this position, unless the position is now vacant. If it is vacant, the supervisor of the position should complete it. If for any reason this is not possible, a person thoroughly familiar with the position may complete it on behalf of the supervisor. The signature below must be that of the person who did complete the questionnaire.

The statements I made in this questionnaire are complete and accurate, and they correctly describe the aspects of the job for which information was requested.

Print Name and Sign

Date

TO THE SUPERVISOR: In the space below, please provide any additional information that you believe will contribute to a clearer understanding of the duties performed by this position. Use additional paper if needed.

Print Name and Sign

Date

TO THE AGENCY DIRECTOR OR THE AUTHORIZED REPRESENTATIVE OF THE AGENCY DIRECTOR:
This space is reserved for your comments and certification of the contents of this document.

Comments:

I have reviewed the contents of the questionnaire, and it accurately describes this position.

Signature

Title

Date